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PA SECTION

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION III

841 Chestnut Building
Philadelphia, Pennsylvania 19107

FEB 18 1987

EPA, R3

FEB - 6 1987

Re: Notification of Hazardous Waste Activity

Dear Hazardous Waste Handler:

The U.S. Environmental Protection Agency (EPA) has received your Notification Form, which you filed pursuant to Section 3010 of the Resource Conservation and Recovery Act, as amended.

We have reviewed the form and are returning it to you for clarification or missing information as indicated below:

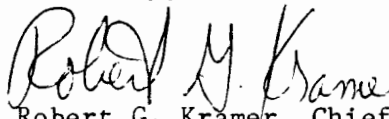
- ☐ Location address inappropriate; complete street address is required.
- ☒ Required items which are missing are encircled in red.
- ☐ Signature/date missing.
- ☐ The form was illegible. A new form is enclosed.

Please return the completed form together with this letter to the address indicated in the letterhead no later than 28 Feb 1987.

EPA will consider you as having not notified and in violation of Section 3010 of the Act if you do not complete and return this form by the date indicated.

If you have any questions pertaining to the Notification Form call 215-597-2780.

Sincerely,


Robert G. Kramer, Chief
RCRA Support Section
Waste Management Branch

Attachment

Chemetals Incorporated EPA ID# Request:

This facility will be receiving by-product materials as feed stock for beneficial reuse. Many suppliers are requesting an EPA identification number because they choose to use this number in their shipping manifests.

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Hazardous Waste Division

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION III

841 Chestnut Building
Philadelphia, Pennsylvania 19107

CHEMICALS

SUBJECT: RCRA Inspection

MDD 03 886 2769

DATE: 10/28/87

FROM: Vernon Butler, Environmental Engineer
DELMARVA/DC/WV RCRA Enforcement Section (3HW15)

TO: FILE

THRU: John A. Armstead, Chief
DELMARVA/DC/WV RCRA Enforcement Section (3HW15)

BASED UPON A REVIEW OF THE RCRA INSPECTION REPORT FOR THE FACILITY
REFERENCES ABOVE, I HAVE DETERMINED THAT NO FURTHER ACTION IS
REQUIRED AT THIS TIME.

CEI



State of Maryland
Department of Health and Mental Hygiene
Office of Environmental Programs
201 West Preston Street, Baltimore, Maryland 21201

Report of Observations

Type of Inspection/Observations: Complaint Date 9/17/77

Facility Name: unidentified

Remarks: 1st floor, room 201, Baltimore 21206

On 9/17/77, I visited the site and observed
the following conditions:

The 1st floor was carpeted with a dark brown
carpet. The carpet was in good condition.

The walls were painted a light blue color.
The ceiling was painted a white color.

The floor was made of wood. The wood was
in good condition.

The room was well lit. The lighting was
adequate.

The room was clean. There was no
visible dirt or debris.

The room was well ventilated. The
air was fresh.

The room was well maintained. The
carpet was in good condition.

The room was well kept. There was no
visible dirt or debris.

The room was well lit. The lighting was
adequate.

The room was clean. There was no
visible dirt or debris.

The room was well ventilated. The
air was fresh.

The room was well maintained. The
carpet was in good condition.

The room was well kept. There was no
visible dirt or debris.

Observer: [Signature] Person Interviewed: [Signature]

Type of Inspection/Observations: 1. Visual Date 11/1/11

Remarks: _____

Observer: _____ **Person Interviewed:** _____

Name Change

2006 → GEN

MAY 31 1991

HAZARDOUS WASTE DATA MANAGEMENT SYSTEM
MAINTENANCE FORM FOR NOTIFICATION

EPA-ID # M: DQ388:6:2:7:6:9: DATE: 4/29/91

FACILITY NAME Chemicals Incorporated

New Facility Name Chemicals Incorporated - Balt

Contact Person/Position

Pratt Katrina Manager of Infr (301) 636-7158
(Last, First, M) Title Tel No.

MAILING Street 711 Pittman Road

ADDRESS City Baltimore State MD Zip 21206

LOCATION Street _____

ADDRESS City _____ State _____ Zip _____

County Name _____ County Code _____

Owner Name _____ Operator Name _____

Same
711 Pittman Road
Baltimore, MD 21206

Activity code
→ 1 Gen Tr Tsd
5 Market or Burn
A Gen Mark to Burn
B Other Marketer
C Burner

Used Oil Fuel Activities
6 Off-Spec Use Oil Fuel
A Gen Mark to Burn
B Other Marketer
C Burner
7 Spec Used Oil Fuel Mark

Waste Fuel Burn : Type of Coabustice Device
Utility Boiler Ind. Boiler Ind. Furnace


Mode of Transportation (Transporters Only)
Air Rail Highway Water Other

Maintanance Ser
W1 Card F2 Card

| | | | | |
|---------------------------|-------|----------------------|-------------|--------------------------|
| Existing Waste Code | _____ | New Waste Code | _____ | Non-Reg Ind _____ (e303) |
| _____ | _____ | <u>DC01</u> | <u>DC09</u> | |
| _____ | _____ | <u>DC02</u> | <u>DO11</u> | |
| _____ | _____ | <u>DC07</u> | <u>FC03</u> | |
| | | | <u>MC01</u> | |

301
636-
7158

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

EPA

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐ A. First Notification

☒ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

MDDO38862769

II. Name of Installation (Include company and specific site name)

CHEMETALS INCORPORATED-BALT

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

711 PITTMAN ROAD

Street (continued)

City or Town

BALTIMORE

State

MD

ZIP Code

21226

County Code

County Name

ANNE ARUNDEL COUNTY

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

711 PITTMAN ROAD

City or Town

BALTIMORE

State

MD

ZIP Code

21206

V. Installation Contact (Person to be contacted)

Name (last)

PRATT KATRINA

Job Title

MANAGER OF SAFE

301-636-7158

VI. Installation Contact Address

☒ Physical Address ☐ Mailing Address

☒ 711 PITTMAN ROAD

City or Town

BALTIMORE

State

MD

ZIP Code

21206

VII. Ownership (See Instructions)

A. Name of Installation

CHEMETALS INCORPORATED

711 PITTMAN ROAD

BALTIMORE

MD

21226

301-636-7158

Changed Day Year

- 2 -

CHEMETALS

April 1, 1991

Maryland Department of Environment
Hazardous Waste Program
2500 Broening Highway
Baltimore, Maryland 21224

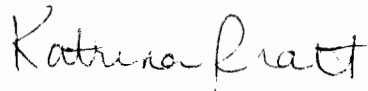
ATTENTION: SUBSEQUENT EPA NOTIFICATION OF REGULATED WASTE ACTIVITY
CHANGE IN INSTALLATION MAILING ADDRESS

Dear Sir or Madam:

Enclosed please find a completed and signed subsequent EPA Notification of Regulated Waste Activity Form 8700-12. The form has been revised to reflect the site's present installation mailing address and installation contact person.

If any questions should arise, kindly contact me at the telephone number listed above.

Sincerely,



Katrina Pratt
Manager of Safety and Environmental Engineering

kp/enclosures



Chemetals Quality Commitment
Continuous Improvement

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GENERAL STATE SECTION

APR 25 1991

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APR 1991

HAZARDOUS WASTE DIVISION

United States Environmental Protection Agency
Washington, DC 20460
Notification of Hazardous Waste ActivityPlease refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).**For Official Use Only**

Comments

C

C

Installation's EPA ID Number

Approved

Date Received
(yr. mo. day)

C

F

MDD038862769

T/A C
1

870219

510
Baltimore**I. Name of Installation**

C

C H E M E T A L S I N C O R P O R A T E D

II. Installation Mailing Address

Street or P.O. Box

C

3

7 3 1 0 R I T C H I E H I G H W A Y S T E 2 0 0

City or Town

State

ZIP Code

C

4

G L E N B U R N I E M D 2 1 0 6 1

III. Location of Installation

Street or Route Number

C

5

7 1 1 P I T T M A N R O A D

City or Town

State

ZIP Code

C

6

B A L T I M O R E M D 2 1 2 2 6

IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C

2

K A R C H E R R E G I S D I R C T 3 0 1 7 6 0 1 9 0 0

V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C

B

C H E M E T A L S I N C P

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)**A. Hazardous Waste Activity****B. Used Oil Fuel Activities**☐

1a. Generator

☒

1b. Less than 1,000 kg/mo.

☐

2. Transporter

☐

3. Treater/Storer/Disposer

☐

4. Underground Injection

☐

5. Market or Burn Hazardous Waste Fuel

(enter 'X' and mark appropriate boxes below)

☐

a. Generator Marketing to Burner

☐

b. Other Marketer

☐

c. Burner

☐

6. Off-Specification Used Oil Fuel

(enter 'X' and mark appropriate boxes below)

☐

a. Generator Marketing to Burner

☐

b. Other Marketer

☐

c. Burner

☐

7. Specification Used Oil Fuel Marketer (or On site Burner)

Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)☐ A. Utility Boiler☐ B. Industrial Boiler☐ C. Industrial Furnace**VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))**☐

A. Air

☐

B. Rail

☐

C. Highway

☐

D. Water

☐

E. Other (specify)

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☒

A. First Notification

☐

B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

| ID — For Official Use Only | | | | | | | | | | | | | |
|----------------------------|--|--|--|--|--|--|--|--|--|--|--|-----|---|
| C | | | | | | | | | | | | T/A | C |
| W | | | | | | | | | | | | | 1 |

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|---|---|---|----|----|----|
| 1 | 2 | 3 | 4 | 5 | 6 |
| | | | | | |
| 7 | 8 | 9 | 10 | 11 | 12 |
| | | | | | |

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 13 | 14 | 15 | 16 | 17 | 18 |
| | | | | | |
| 19 | 20 | 21 | 22 | 23 | 24 |
| | | | | | |
| 25 | 26 | 27 | 28 | 29 | 30 |
| | | | | | |

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 31 | 32 | 33 | 34 | 35 | 36 |
| | | | | | |
| 37 | 38 | 39 | 40 | 41 | 42 |
| | | | | | |
| 43 | 44 | 45 | 46 | 47 | 48 |
| | | | | | |

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 49 | 50 | 51 | 52 | 53 | 54 |
| | | | | | |

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☐ 1. Ignitable
(D001)

☐ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☐ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

| | | |
|--------------------------------------|--|-----------------------|
| Signature <i>Regis A. Karcher</i> | Name and Official Title (type or print) Regis A. Karcher Director of Environment | Date Signed 1/7/87 |
|--------------------------------------|--|-----------------------|

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JAN 9 1987

Hazardous Waste